PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

			or <u>Fax</u>	(571)-273-2885	5 2222 1 100	
INSTRUCTIONS: This fo appropriate. All further coindicated unless corrected maintenance fee notification	respondence including the below or directed otherwise	smitting the ISSI Patent, advance o in Block 1, by (JE FEE and PUBLI rders and notification a) specifying a new o	CATION FEE (if req of maintenance fees correspondence addres	uired). Blocks 1 through 5 will be mailed to the curren s; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
25764 75	90 05/03/2006				ertificate of Mailing or Tran	
FAEGRE & BEN PATENT DOCKE 2200 WELLS FAR			I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
MINNEAPOLIS, N	MN 33402		Kristine S		tefano	(Depositor's name)
					- Styames	(Signature)
				July 24, 2	006	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		ITOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/054,631	01/22/2002	H. Duane Saun		rs	51895-231295	8810
	IULTI-AXIS CERVICAL A					
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE PI	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$0	\$700	08/03/2006
EXAMINER		ART UN	IIT C	LASS-SUBCLASS	_	
ALI, SHUMAYA B		3743		602-032000		,
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate	e address or indication of "Fe lence address (or Change of (22) attached. ion (or "Fee Address" Indica or more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	L	or type)	10 to	
(A) NAME OF ASSIGN		low, no assignee of this form is NO		CITY and STATE OR	nee is identified below, the d	ocument has been filed for
	•	rios (ruill mat ha mm			Samanation on other mirrate on	our antitu D.Couramment
4a. The following fee(s) are ✓ Issue Fee ✓ Publication Fee (No s ✓ Advance Order - # of	Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number					
a. Applicant claims S	(from status indicated above	37 CFR 1.27.			LL ENTITY status. See 37 C	
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if required) words of the United States Pate	vill not be accepted and Trademark	of free (if any) or to a from anyone other the office.	re-apply any previous nan the applicant; a reg	ly paid issue fee to the application is tered attorney or agent; or the	ne assignee or other party in
Authorized Signature	al Shu	موروا		Date_Ju1	y 24, 2006	
Typed or printed name _		Registration No. 35,786				
an application. Confidential submitting the completed apthis form and/or suggestions	ty is governed by 35 U.S.C. plication form to the USPT for reducing this burden, sh	122 and 37 CFR O. Time will vary ould be sent to the	1.14. This collection in depending upon the control of the control	s estimated to take 12 individual case. Any conficer, U.S. Parent and	the public which is to file (an minutes to complete, includir omments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	ng gathering, preparing, and me you require to complete artment of Commerce, P.O.

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

&